PTO/SB/22 (12-04)
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Under the Paperwork	Resuction, and 1995, no persons are required to	of information unless if displays a valid OMB control number.							
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional)						
/ <del>*</del>	FY 2005	2450-0626P							
	the Consolidated Appropriations Act, 20								
Application Number	er 10/758,045-Conf. #6	5140	Filed Jan	nuary 16, 2004					
For LIGHT SOURCE ASSEMBLY OF A BACKLIGHT MODULE									
Art Unit 287	5		Examiner	R. J. May					
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.									
The requested ext	ension and fee are as follows (check	time period desi	red and enter the app	ropriate fee below):					
		<u>Fee</u>	Small Entity Fee						
X One r	nonth (37 CFR 1.17(a)(1))	\$120	\$60	\$ 60.00					
Two n	nonths (37 CFR 1.17(a)(2))	\$450	\$225	\$					
Three	months (37 CFR 1.17(a)(3))	\$1020	\$510	\$					
· · Four	months (37 CFR 1.17(a)(4))	\$1590	\$795	\$					
Five	nonths (37 CFR 1.17(a)(5))	\$2160	\$1080	\$					
x Applicant claims small entity status. See 37 CFR 1.27.									
	•	N 1.21.							
X A check in	the amount of the fee is enclosed.								
Payment by	y credit card. Form PTO-2038 is atta	ached.							
The Director has already been authorized to charge fees in this application to a Deposit Account.									
	or is hereby authorized to charge any								
Deposit Ac	count Number 02-2448	I have encl	osed a duplicate copy	of this sheet.					
,	•		•	*					
I am the	applicant/inventor.								
	assignee of record of the entire	interest. See 37	CFR 3.71.						
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).									
	attorney or agent of record. Re	gistration Numbe	r						
. x	attorney or agent under 37 CFR								
Fegistration Amber if acting under 37 CFR 1.34			32,334	· ·					
			November 2, 2005						
Signature			Date						
Joe McKinney Muncy			(703) 205-8000						
Typed or printed name			Telephone Number						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
Total of 1 forms are submitted.									
	roms are sublimite								

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PTO/SB/17 (12-04v2) Approved for use through 7/31/2006. OMB 0651-0032

Linder the Paner	Reduction And	95 no person are rec	uired to resn	U.S. Patent	and Tradema	ark Office; U.S. DEF on unless it displays	ARTMENT ( a valid OMB	of COMMERCE control number.			
Under the Paper Cox Reduction Ages 1995, no person are required to r				Complete if Known							
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL						10/758,045-Conf. #6140					
						January 16, 2004					
• —— • • • • • • •						Chin-Wen CHOU					
For FY 2005				xaminer Name	F	R. J. May					
X Applicant claims small entity status. See 37 CFR 1.27				Art Unit		2875					
TOTAL AMOUNT OF PAYMENT (\$) 60.00				ttomey Docket i	No. 2	2450-0626P					
METHOD OF PA	YMENT (check a	ill that apply)									
X Check Credit Card Money Order None Other (please identify):											
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP											
For the above	e-identified depos	sit account, the Di	rector is he								
Charg	e fee(s) indicated	below		Charge	e fee(s) ind	icated below, ex	cept for t	he filing fee			
	e any additional fe		nent of	x Credit	any overpa	syments					
FEE CALCULAT	under 37 CFR 1.	1.7 and 1.17									
1. BASIC FILING, S		AMINATION FEE	s								
	•	ING FEES		CH FEES	EXAMIN	IATION FEES					
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)			
Utility	300	150	500	250	200	100					
Design	200	100	100	50	130	65					
Plant	200	100	300	150	160	80					
Reissue	300	150	500	250	600	300					
Provisional	200	. 100	0	0	0	0					
2. EXCESS CLAIM		,	-	-	-	•		Small Entity			
Fee Description		>					Fee (\$)	Fee (\$)			
Each claim over 20	` •	•					50 200	25 100			
Each independent c Multiple dependent		ung Keissues)					200 360	100 180			
		Eoo (#)	Fee Pai	d (\$)	14	ultiple Depende					
Total Claims 5 - 20	Extra Claims  0 x	Fee (\$) =	ree Pal	~ (4)		<u> </u>	Fee Paid (				
-20	x				<u>. e</u>	- 171		<u> </u>			
Indep. Claims	Extra Claims	Fee (\$)	Fee Pai	d (\$)				<del></del>			
1 -3=		= _		<del></del>							
3. APPLICATION S		and 100 -1	fnan/	م - 1 - حمله برام <i>ب</i>	onicall- e	lad caguarra -	commut				
If the specification listings under 3	and drawings ex 7 CFR 1.52(e)), t	ceeu 100 sheets o he application siz	i paper (e) e fee due i	s \$250 (\$125 f	onically fil for small er	neu sequence or ntity) for each a	dditional s	60			
	on thereof. See 3:					,,					
Total Sheets	Extra Sheets			itional 50 or frac	ction thereo	f <u>Fee (\$)</u>	Fee	Paid (\$)			
- 1	100 =	/50	(n	ound <b>up</b> to a who	ole number)	х	=				
4. OTHER FEE(S) Fees Paid (\$)											
	ecification, \$130				· · ·		-	20.00			
Other (e.g., late	filing surcharge):	1251 Extension	tor resp	onse within fi	rst month			50.00			
SUBMITTED BY	//			onlot—it **							
Signature	Six Mike	may /hun		egistration No. attorney/Agent)	32,334	Telephone	(703) 20	05-8000			
Name (Print/Tyne) Ic	McKinney Mu	incy I	7			Date	Novembe	er 2. 2005			